

Please type a plus sign (+) inside this box → [+]

DEC 20 2002

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

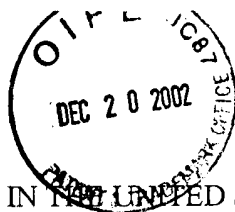
<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number	10/073,284
		Filing Date	February 13, 2002
		First Named Inventor	Hirokazu YAMAGATA et al.
		Group Art Unit	2823
		Examiner Name	S. Foong
Total Number of Pages in This Submission		Attorney Docket Number	740756-2435

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Other
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Declaration and Power of Attorney	<b>RECEIVED</b> DEC 23 2002 TECHNOLOGY CENTER 2800
<input type="checkbox"/> After Final	<input type="checkbox"/> Licensing-related Papers	
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition	
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Petition to Convert to a Provisional Application	
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Jeffrey L. Costellia - Reg. No. 35,483 Nixon Peabody LLP 8180 Greensboro Drive Suite 800 McLean, VA 22102
Signature	
Date	December 17, 2002

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	
Type or printed name	
Signature	Date

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.



Docket No. 740756-2435

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: )  
Hirokazu YAMAGATA et al. ) Group Art Unit: 2823  
Serial No. 10/073,284 ) Examiner: S. Foong  
Filed: February 13, 2002 )  
For: LIGHT EMITTING DEVICE AND METHOD OF )  
MANUFACTURING THE SAME )

TECHNOLOGY CLASS. 2800

RECEIVED  
DEC 23 2002

#8/105  
12/23/02  
/s

INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents  
Washington, D.C. 20231

Sir:

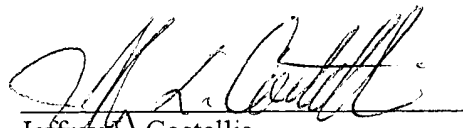
In accordance with the provisions of 37 C.F.R. 1.56 and 37 C.F.R. 1.97-1.99, it is requested and petitioned that the references listed on the attached Form PTO-1449 be made of record in the above-identified application.

Copies of the references are submitted herewith in accordance with 37 C.F.R. 1.98(a).

In the event applicant(s) has overlooked the need for any petition and fee for extension of time, and such extension is required, applicant(s) requests that this be considered a petition therefor and that such fee be charged to Deposit Account No. 19-2380.

The Commissioner is hereby authorized to charge fees under 37 CFR 1.16, 1.17, 1.20(a), 1.20(b), 1.20(c) and 1.20 (d) (except the Issue Fee) which may be required now or hereafter, or credit any overpayment, to Deposit Account No. 19-2380. A duplicate copy of this sheet is attached.

Respectfully submitted,

  
Jeffrey L. Costellia  
Registration No. 35,483

NIXON PEABODY LLP  
8180 Greensboro Drive, Suite 800  
McLean, Virginia 22102  
(703) 770-9300  
(703) 770-9400 FAX

BEST AVAILABLE COPY